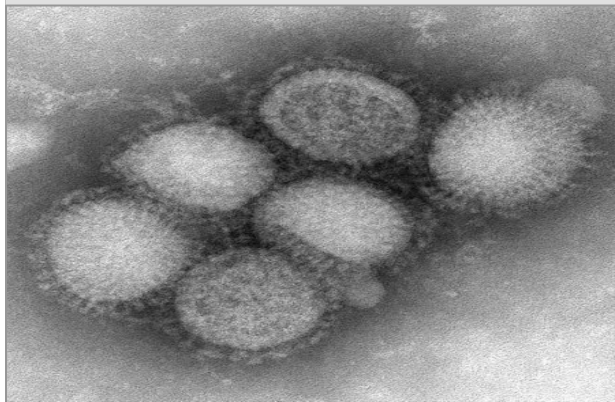


# ESF 8 Health & Medical Area Command Bulletin

## PREPARING FOR NOVEL H1N1 FLU RESPONSE

July 31, 2009

Bulletin #2



### The Situation:

The novel H1N1 influenza virus, which emerged during the spring, continues to circulate in the United States and globally. Health officials are monitoring disease spread and paying close attention to illness patterns to help inform planning for a second wave of novel H1N1 flu this fall. Currently pregnant women, children and individuals with some underlying health conditions appear to be at higher risk for severe illness. Federal health officials have emphasized the need for vaccine distribution planning by state and local officials for the novel H1N1 vaccine, as a key component of disease mitigation strategies this fall. On July 29th the Advisory Committee on Immunization Practices (ACIP) provided its recommendation to the Centers for Disease Control and Prevention (CDC) regarding priority groups for the novel H1N1 vaccine.

#### *The recommended priority groups are:*

- Pregnant women
- Healthcare workers and Emergency Medical Service providers
- Household and caregiver contacts of children younger than 6 months in age
- Children and young adults 6 months-24 years old
- Persons 25-64 years old who have health conditions associated with higher risk of medical complications from flu (e.g. cardiovascular disease, diabetes, asthma)

Further prioritization among or within these groups may be needed based on vaccine availability this fall.

For additional information see here:

<http://www.cdc.gov/h1n1flu/vaccination/acip.htm>

### ESF 8- Health, Medical and Mortuary Response Planning Assumptions:

Health & Medical Area Command has established a set of planning assumptions for the anticipated second wave of the novel H1N1 flu this fall.

These assumptions help guide ongoing planning by the Area Command and by our partner organizations:

- Continuity of health, medical and mortuary services in King County is essential to the public's health and safety.
- Coordinated health and safety messaging is essential to protecting the public's health.
- Healthcare agencies will require medical resource and information assistance from Health and Medical Area Command.
- There will be high demand for medical resources including personal protective equipment and limited availability of these resources for the duration of the flu season.
- Public and private organizations may have to implement business continuity plans.
- The novel H1N1 strain is expected to circulate more widely during the fall, possibly as early as September, and cause a larger number of illnesses than occurred during the spring outbreak.
- Seasonal influenza strains are also expected to circulate although it is not known to what extent. The novel H1N1 strain is expected to be the predominant strain.
- A majority of the U.S. and local population has no immunity to the current novel H1N1 influenza strain.

### About this Bulletin:

*Public Health –Seattle & King County* activated the Health & Medical Area Command on July 7 to coordinate health, medical and mortuary planning for regional hazards including **H1N1 influenza** and the **Howard Hanson Dam – Green River Valley flood risks**. Each week we will issue weekly bulletins on each of these topics to outline key situational updates, planning activities and information specific to health, medical and mortuary response.

### What is Health & Medical Area Command?

Area Command is an incident management tool used to coordinate emergency response efforts across multiple jurisdictions, and among multiple agencies vying for the same resources. Health & Medical Area Command coordinates health information, resources and sets policy decisions for the county-wide health response during a disaster. The health, medical and mortuary response is led by the ESF 8 Area Commander, who reports to the Local Health Officer.

For tomorrow's emergency **VOLUNTEER TODAY!** King County Public Health Reserve Corps needs medical and non-medical volunteers during public health emergencies and major disasters!

Visit [www.kingcounty.gov/health/phrc](http://www.kingcounty.gov/health/phrc) or email [phrc@kingcounty.gov](mailto:phrc@kingcounty.gov).

## ESF 8- Health, Medical and Mortuary Response Planning Assumptions continued:

- Severity of the novel H1N1 strain will be similar to what was experienced during the spring, however there may be more widespread outbreaks resulting in many more persons becoming ill and seeking medical care.
- Pregnant women, children and adults with certain underlying health conditions are at higher risk for severe illness related to the current novel H1N1 influenza strain.
- Underlying health conditions including cardiovascular disease, respiratory disease, diabetes and cancer are currently considered risk factors for serious H1N1 influenza disease. Obesity may also be a risk factor for severe disease.<sup>1</sup>
- The timeline and quantities of vaccine for novel H1N1 influenza are not known yet, but it is unlikely that significant quantities will be available before late October.
- Vaccine distribution will follow federal prioritization guidelines.
- Strategies for distributing vaccine will focus on utilizing existing systems. In particular, the Vaccines for Children Program may be expanded to allow participation by adult immunizers. Healthcare agencies, Public Health clinics, private providers and pharmacies are also important options to help assure optimal distribution of the novel H1N1 vaccine.
- The novel H1N1 vaccine will require two doses and need to be given between 21-28 days apart<sup>2</sup>

<sup>1</sup>World Health Organization. Pandemic (H1N1) 2009 briefing note 4  
[http://www.who.int/csr/disease/swineflu/notes/h1n1\\_situation\\_20090724/en/index.html](http://www.who.int/csr/disease/swineflu/notes/h1n1_situation_20090724/en/index.html) [accessed July 27, 2009]

<sup>2</sup>Centers for Disease Control and Prevention. CDC Novel H1N1 Vaccination Planning Q & A  
<http://www.cdc.gov/h1n1flu/vaccination/statelocal/qa.htm> [accessed July 27, 2009]

## Current Planning Activities:

Public Health and the Health & Medical Area Command staff are actively working with local, state and federal partners to prepare for a resurgence of novel H1N1 influenza this fall. This work includes:

- Ongoing surveillance of novel H1N1 influenza in King County
- Development of a public education campaign in coordination with regional partners
- Coordination with the State Department of Health regarding planning for the distribution of Strategic National Stockpile assets
- Coordination with school districts and State Department of Health regarding school absenteeism reporting
- Coordination with the Centers for Disease Control and Prevention and State Department of Health regarding vaccine distribution planning
- Coordination with healthcare on vaccine planning, medical resource management and an increase in demand for services
- Development of clinical protocols for appropriate use and prioritization of medical resources
- Scheduling Business Resiliency trainings for healthcare and community based organization partners

## In the news:

6 in 10 Americans Believe Serious Outbreak of Influenza A (H1N1) Likely in the Fall/Winter – Harvard  
<http://www.hsph.harvard.edu/news/press-releases/2009-releases/national-survey-americans-influenza-a-h1n1-outbreak-fall-winter.html>

Americans Worried about Flu's Impact on Finances – New York Times  
[http://www.nytimes.com/2009/07/20/health/20flu.html?\\_r=1&ref=health](http://www.nytimes.com/2009/07/20/health/20flu.html?_r=1&ref=health)

ACIP Targets up to 159 million Americans for H1N1 Vaccination - CIDRAP  
<http://www.cidrap.umn.edu/cidrap/content/influenza/swineflu/news/jul2909acip.html>

## Planning Recommendations:

### ✓ Review your pandemic influenza response plan and business continuity plans

- Plan for continuity of operations when there is significant staff absenteeism (20-40%)
- Develop strategies for staff telecommuting, if necessary
- Consider strategies for staff and patient transportation if there is concurrent flooding in the Green River Valley
- Review protocol for asking sick staff to stay home
- Review or revise sick leave policies to support staff staying home if they are ill
- Support staff personal and family preparedness; encourage staff to have alternate child care plans if kids are sick or if schools or daycares are closed
- Evaluate supply needs and anticipate supply chain disruption. Stockpile supplies that may be needed but less readily available.

### ✓ Develop or refine medical surge plans

- See also: Influenza Planning and Response for Medical Offices and Outpatient Facilities  
<http://www.cdc.gov/h1n1flu/10steps.htm>